

**SAMPLE
HEALTH CAREERS
COOPERATIVE EDUCATION**
Monthly Calendar

NAME _____

MONTH _____

DATE	IN	OUT	TOTAL HOURS	WORK LOCATION
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				
26				
27				
28				
29				
30				
31				

TOTAL

Days Worked _____

Sick Days _____

Class Days _____

School Function _____

I verify that the above hours to be accurate

Use Letters to identify the following:

S = Sick Leave

CL = Class Time

SF = School Function

Student _____ Supervisor _____ Date _____